

B.S.

In the United States Patent and Trademark Office

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Applicant: Luciano, Joanne Sylvia Group: 3736
 Serial No.: 09/045,734 Examiner: Winakur, E.
 Filed: March 20, 1998
 For: A Method for Predicting the Therapeutic Outcome of a Treatment for
 an Affective Disorder

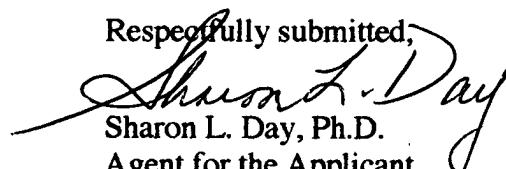
Commissioner of Patents and Trademarks
 Box ISSUE FEE
 Washington, D.C. 20231

Extension of Time Transmittal

Sir:

- Transmitted herewith is a request for an extension of time. The extension requested is for a period of two months. A check in the amount of \$190 made out to the Commissioner for Patents and Trademarks accompanies the request. The date of mailing of the Issue Fee Transmittal Request was Dec. 21, 1999; its due date was March 21, 2000 and that fee was timely filed.
- A Divisional Application in the above identified case is being submitted under separate cover.
- Applicant is a small entity and the Small Entity Declaration is on file.

Respectfully submitted,


 Sharon L. Day, Ph.D.

Agent for the Applicant

Reg. No. 39,162

9 Pleasant St.

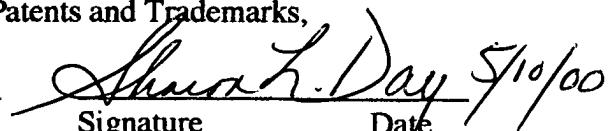
Sharon, MA 02067

(781)784-9602

Dated:

CERTIFICATION UNDER 37 CFR 1.10

I hereby certify that this Transmittal Letter and the documents referred to as enclosed herein are being deposited with the United States Postal Service on the date May 10, 2000 in an envelope as "Express Mail Post Office to Addressee", Mailing Label Number EK577601813US addressed to the Commissioner of Patents and Trademarks, Washington, DC 20231.


 Signature Date
 5/10/00

Note: Each paper referred to as enclosed herein had the number of the "Express Mail" mailing label placed thereon placed thereon prior to mailing.

Batch G07

1530 3/6/00

94

PTO/SB/21 (6-98)

Approved for use through 09/30/2000, OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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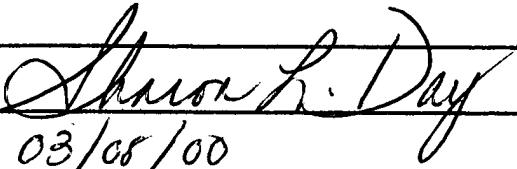


TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/045,734
		Filing Date	03/20/98
		First Named Inventor	Buciano
		Group Art Unit	3736
		Examiner Name	Winakur
Total Number of Pages in This Submission	3	Attorney Docket Number	2000sd

ENCLOSURES (check all that apply)

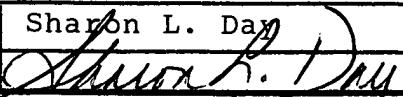
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i>	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i>
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Sharon L. Day	
Signature		
Date	03/08/00	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: **03/08/00**

Typed or printed name	Sharon L. Day	
Signature		Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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PTO/SB/17 (12/99)

Approved for use through 09/30/2000, OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

Small Entity payments **must** be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$190.00)

Complete if Known

Application Number	09/045,734
Filing Date	March 20, 1998
First Named Inventor	Luciano, Joanne Sylvia
Examiner Name	Winakur
Group / Art Unit	3736
Attorney Docket No.	2000sd

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	690	201 345 Utility filing fee	
106	310	206 155 Design filing fee	
107	480	207 240 Plant filing fee	
108	690	208 345 Reissue filing fee	
114	150	214 75 Provisional filing fee	

SUBTOTAL (1) (\$) 0

2. EXTRA CLAIM FEES

Extra Claims	Fee from below	Fee Paid
Total Claims	-20** =	
Independent Claims	-3** =	
Multiple Dependent		

**or number previously paid, if greater; For Reissues, see below

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
103	18	203 9 Claims in excess of 20
102	78	202 39 Independent claims in excess of 3
104	260	204 130 Multiple dependent claim, if not paid
109	78	209 39 ** Reissue independent claims over original patent
110	18	210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 65 Surcharge - late filing fee or oath	
127	50	227 25 Surcharge - late provisional filing fee or cover sheet	
139	130	139 130 Non-English specification	
147	2,520	147 2,520 For filing a request for reexamination	
112	920*	112 920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	
115	110	215 55 Extension for reply within first month	
116	380	216 190 Extension for reply within second month	
117	870	217 435 Extension for reply within third month	
118	1,360	218 680 Extension for reply within fourth month	
128	1,850	228 925 Extension for reply within fifth month	
119	300	219 150 Notice of Appeal	
120	300	220 150 Filing a brief in support of an appeal	
121	260	221 130 Request for oral hearing	
138	1,510	138 1,510 Petition to institute a public use proceeding	
140	110	240 55 Petition to revive - unavoidable	
141	1,210	241 605 Petition to revive - unintentional	
142	1,210	242 605 Utility issue fee (or reissue)	
143	430	243 215 Design issue fee	
144	580	244 290 Plant issue fee	
122	130	122 130 Petitions to the Commissioner	
123	50	123 50 Petitions related to provisional applications	
126	240	126 240 Submission of Information Disclosure Stmt	
581	40	581 40 Recording each patent assignment per property (times number of properties)	
146	690	246 345 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	690	249 345 For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)			
Other fee (specify)			

Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 190.00

SUBMITTED BY

Name (Print/Type)	Sharon L. Day	Registration No. (Attorney/Agent)	39,162	Telephone	7817849602
Signature	<i>Sharon L. Day</i>			Date	5/10/00

WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.